

MASSACHUSETTS PROPERTY INSURANCE UNDERWRITING ASSOCIATION

(617) 723-3800

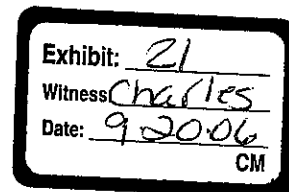
(800) 392-6108

Insured's Name and Mailing Address

JOAN CHARLES A/K/A JOAN F. GREAVES
14 DITSON STREET
DORCHESTER, MA 02122

Producer

ONE CALL INS AGCY., INC.
121 B TREMONT ST
BRIGHTON MA 02135



Expiration Date 01/08/2003

Policy Number 0662672 - 3

The Association offers to renew this policy. To accept this renewal offer please return the tear-off portion of this invoice and payment to the Association. To avoid a lapse in coverage this invoice and payment must be received by the Association on or before the Expiration date/Due date. If payment is received within sixty days of the Expiration date/Due date the policy will be renewed as of the date of the Associations receipt of the payment. Payments received by the Association more than sixty days after the Expiration date/Due date will be rejected and the policy will not be renewed.

Any changes to the Renewal Policy may only be made by submitting an Endorsement Request to the Association after you have paid this invoice. To make the changes effective as of the inception date of the Renewal Policy, the Endorsement Request must be received by the Association on or before the inception date of the Renewal Policy.

Please Remember

- * Read the Inspection and Credit reporting notices on the reverse side.
- * Make your check payable to MASSACHUSETTS PROPERTY INSURANCE UNDERWRITING ASSOCIATION
- * Write your policy number on your check.
- * Mail the original tear-off portion of this Offer/Invoice and your check in the enclosed envelope.
- * Mail only one original Offer/Invoice and one check per envelope. Copies of the Offer/Invoice cannot be processed by the lockbox.
- * Do **not** send any other correspondence with this Offer/Invoice and your check.
- * Do **not** send cash.
- * Mail this Invoice and your check to the address below.

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PLEASE WRITE YOUR POLICY NUMBER ON YOUR CHECK AND RETURN THIS
INVOICE WITH YOUR PAYMENT IN THE ENVELOPE PROVIDED.

INVOICE

Tear Here

Insured's Name: JOAN CHARLES A/K/A JOAN F. GREAVES

Policy Number: 0662672 - 3

| Date Billed | Premium Due | Minimum Due | Due Date | Amount Enclosed |
|-------------|-------------|-------------|-------------|-----------------|
| 11/29/ 2002 | \$1,844.00 | \$461.00 | 01/08/ 2003 | |

Please make sure your check is made payable and sent to:

MASSACHUSETTS PROPERTY INSURANCE UNDERWRITING ASSOCIATION
PO BOX 9693
MANCHESTER, NH 03108-9693

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